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## BIB DATA SHEET

CONFIRMATION NO. 2775

|  |  |   |   |                                 |  |                                    |
|--|--|---|---|---------------------------------|--|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/699,468   | <b>FILING or 371(c)<br/>DATE</b><br>10/31/2003<br><b>RULE</b>  | <b>CLASS</b><br>707   | <b>GROUP ART UNIT</b><br>2168   | <b>ATTORNEY DOCKET<br/>NO.</b>  |  |                                    |
| <b>APPLICANTS</b><br>Karen J. Smiley, Benson, NC;<br>Thomas E. Long, Wake Forest, NC;<br>David N. Cox, Raleigh, NC;  |  |   |   |                                 |  |                                    |
| <b>** CONTINUING DATA *****</b> <i>TP none</i>   |  |   |   |                                 |  |                                    |
| <b>** FOREIGN APPLICATIONS *****</b> <i>TP none</i>  |  |   |   |                                 |  |                                    |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>02/02/2004   |  |   |   |                                 |  |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature |  | <input type="checkbox"/> Met after Allowance<br><i>TP</i><br>Initials | <b>STATE OR<br/>COUNTRY</b><br>NC   | <b>SHEETS<br/>DRAWINGS</b><br>4 | <b>TOTAL<br/>CLAIMS</b><br><del>39</del> 4 | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>ABB INC.<br>LEGAL DEPARTMENT-4U6<br>29801 EUCLID AVENUE<br>WICKLIFFE, OH 44092<br>UNITED STATES  |  |   |   |                                 |  |                                    |
| <b>TITLE</b><br>Method for evaluating a transformer design   |  |   |   |                                 |  |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1328   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT.<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                 |  |                                    |